

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |  |
|------------------------------|------------------------------|------------------------------|--|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Dave Wu for US Congress

|   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Jill Derby for Congress  | <b>Transaction ID:</b> D6015<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 1901   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 0 |  | 2 | 0 | 0 | 8 |
| M   | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 1   | 0   |         | 2 | 0 |   | 2 | 0 | 0 | 8 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Minden State NV Zip Code 89423   | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement contribution  | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>Jill Derby  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NV District: 02 | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Kagen for Congress   | <b>Transaction ID:</b> D6016<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 100 W. College Ave.   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 8 |  | 2 | 0 | 0 | 8 |
| M   | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 1   | 0   |         | 2 | 8 |   | 2 | 0 | 0 | 8 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Appleton State WI Zip Code 54911   | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement contribution  | <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>   | 500.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>Steve Kagen   | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: WI District: 08 | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Kate Brown Committee   | <b>Transaction ID:</b> D6017<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 2236 SE 10th Ave.   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 1 | 7 |  | 2 | 0 | 0 | 8 |
| M   | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 1   | 0   |         | 1 | 7 |   | 2 | 0 | 0 | 8 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Portland State OR Zip Code 97214   | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement contribution  | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>Kate Brown Committee  | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....